PTO/SB/06 (07-06) 1/2007 OMB 0651-0032

Approved for use through 1/31/2007. OMB 0651-0032

U.S. Patient and Trademank Office; U.S. Department of the Commence of the C

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | Application or Docket Number 10/813,746 | | | ing Date 01/2004 | To be Mailed | |
|---|---|---|---|---|------------------|---|--|------------------------|----------------------------|-------------------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY | | | OTHER THAN OR SMALL ENTITY | | |
| Н | FOR | l N | NUMBER FILED | | NUMBER EXTRA | | RATE (\$) | FEE (\$) | <u> </u> | RATE (\$) | FEE (\$) | |
| | BASIC FEE (37 CFR 1.16(a), (b), (| - | N/A | LD NO | N/A | | N/A | TEE (a) | i | N/A | TEE (8) | |
| ┢ | SEARCH FEE | | N/A | | N/A | | N/A | | 1 | N/A | | |
| H | (37 CFR 1.16(k), (i), (ii) | | N/A | | N/A | | N/A | | ł | N/A | | |
| | (37 CFR 1.16(o), (p), (TAL CLAIMS | or (q)) | minus 20 = | | | | x \$ = | | OR | x s = | | |
| INE | CFR 1.16(i)) EPENDENT CLAIM | S | minus 3 = * | | | ł | x s = | | l on | x s = | | |
| (37 | CFR 1.16(h)) | If the | If the specification and drav | | ns exceed 100 | ł | ~ * | | ł | <u> </u> | | |
| | APPLICATION SIZE (37 CFR 1.16(s)) | FEE shee is \$2 addit | sheets of paper, the application size is \$250 (\$125 for small entity) for ea additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR 1 | | | | | | | | | |
| | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) | | | | | | | | 1 | | | |
| * If | * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | | 1 | TOTAL | | |
| APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR | | | | | | | | | OTHER THAN SMALL ENTITY | | | |
| AMENDMENT | | CLAIMS | HIGHE | | ST | | | | T | | | |
| | 08/29/2008 | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1.16()) | · 132 | Minus | 144 | = 0 | 1 | x \$ = | | OR | X \$50= | 0 | |
| | Independent (37 CFR 1.16(h)) | • 8 | Minus | ···10 | = 0 | 1 | x \$ = | | OR | X \$210= | 0 | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j)) | | | | | | | | OR | | | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | 0 | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1.1601) | | Minus | | = | 1 | x \$ = | | OR | x s = | | |
| | Independent (37 CFR 1,16(h)) | | Minus | *** | = | 1 | x \$ = | | OR | x \$ = | | |
| ä | Application Size Fee (37 CFR 1.16(s)) | | | | |] | | | 1 | | | |
| AM | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | 1 | | | OR | | | |
| | | | | | | | | | OR | TOTAL ADD'L FEE | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in Sife (and by the USETO to noceess) an implication. Confidentiality is governed by 85 US of 22 and 37 CER 1.4. This collection is estimated to state 27 animates to complete in excluding patternity, preparing, and submitting the completed application form to the USETO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segregations form doubling this burden, selected be sent to the Child information Officer. U.S. Fattern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissionment for Patternity, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.